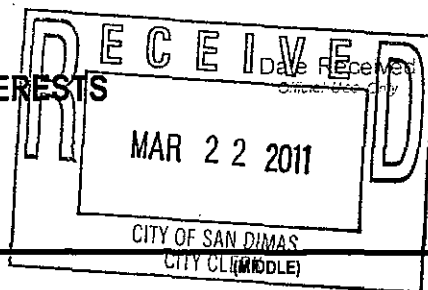


STATEMENT OF ECONOMIC INTERESTS

COVER PAGE



Please type or print in ink.

2011 MAR 25 AM 1:46

NAME OF FILER (LAST) (FIRST) (MIDDLE)  
Ebner John Robert

1. Office, Agency, or Court

Agency Name  
City of San Dimas  
Division, Board, Department, District, if applicable  
City Council  
Your Position  
City Councilmember

► If filing for multiple positions, list below or on an attachment.

Agency: Foothill Transit Position: Alternate Representative

2. Jurisdiction of Office (Check at least one box)

☐ State ☐ Judge (Statewide Jurisdiction)  
☐ Multi-County ☐ County of  
☒ City of San Dimas ☐ Other

3. Type of Statement (Check at least one box)

☒ Annual: The period covered is January 1, 2010, through December 31, 2010.  
-or-  
The period covered is through December 31, 2010.  
☐ Leaving Office: Date Left (Check one)  
○ The period covered is January 1, 2010, through the date of leaving office.  
○ The period covered is through the date of leaving office.  
☐ Assuming Office: Date  
☐ Candidate: Election Year Office sought, if different than Part 1:

4. Schedule Summary

Check applicable schedules or "None."

► Total number of pages including this cover page: 4

☒ Schedule A-1 - Investments - schedule attached  
☐ Schedule A-2 - Investments - schedule attached  
☒ Schedule B - Real Property - schedule attached  
☒ Schedule C - Income, Loans, & Business Positions - schedule attached  
☐ Schedule D - Income - Gifts - schedule attached  
☐ Schedule E - Income - Gifts - Travel Payments - schedule attached

-or-

☐ None - No reportable interests on any schedule

herein and in any attached schedules is true and complete. I acknowledge this is  
I certify under penalty of perjury under the laws of the State of California that

Date Signed March 22, 2011  
(month, day, year)

Signature

**SCHEDULE A-1****Investments****Stocks, Bonds, and Other Interests**  
(Ownership Interest is Less Than 10%)

Do not attach brokerage or financial statements.

**CALIFORNIA FORM 700**

FAIR POLITICAL PRACTICES COMMISSION

Name

John Robert Ebner

|  |   |
|--|---|
| <p>► NAME OF BUSINESS ENTITY<br/><u>Baxter International</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY<br/><u>Health Care products</u></p> <p>FAIR MARKET VALUE<br/><input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000<br/><input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT<br/><input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)<br/><input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499<br/>                                 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:<br/>____/____/10      ____/____/10<br/>ACQUIRED      DISPOSED</p>                          | <p>► NAME OF BUSINESS ENTITY<br/>_____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY<br/>_____</p> <p>FAIR MARKET VALUE<br/><input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000<br/><input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT<br/><input type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)<br/><input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499<br/>                                 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:<br/>____/____/10      ____/____/10<br/>ACQUIRED      DISPOSED</p> |
| <p>► NAME OF BUSINESS ENTITY<br/><u>General Electric</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY<br/><u>appliances, lighting, health care, finance, media</u></p> <p>FAIR MARKET VALUE<br/><input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000<br/><input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT<br/><input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)<br/><input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499<br/>                                 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:<br/>____/____/10      ____/____/10<br/>ACQUIRED      DISPOSED</p> | <p>► NAME OF BUSINESS ENTITY<br/>_____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY<br/>_____</p> <p>FAIR MARKET VALUE<br/><input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000<br/><input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT<br/><input type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)<br/><input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499<br/>                                 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:<br/>____/____/10      ____/____/10<br/>ACQUIRED      DISPOSED</p> |
| <p>► NAME OF BUSINESS ENTITY<br/><u>Manulife Financial Corp.</u></p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY<br/><u>Insurance, investment</u></p> <p>FAIR MARKET VALUE<br/><input checked="" type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000<br/><input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT<br/><input checked="" type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)<br/><input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499<br/>                                 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:<br/>____/____/10      ____/____/10<br/>ACQUIRED      DISPOSED</p>                     | <p>► NAME OF BUSINESS ENTITY<br/>_____</p> <p>GENERAL DESCRIPTION OF BUSINESS ACTIVITY<br/>_____</p> <p>FAIR MARKET VALUE<br/><input type="checkbox"/> \$2,000 - \$10,000      <input type="checkbox"/> \$10,001 - \$100,000<br/><input type="checkbox"/> \$100,001 - \$1,000,000      <input type="checkbox"/> Over \$1,000,000</p> <p>NATURE OF INVESTMENT<br/><input type="checkbox"/> Stock      <input type="checkbox"/> Other _____ (Describe)<br/><input type="checkbox"/> Partnership      <input type="radio"/> Income Received of \$0 - \$499<br/>                                 <input type="radio"/> Income Received of \$500 or More (Report on Schedule C)</p> <p>IF APPLICABLE, LIST DATE:<br/>____/____/10      ____/____/10<br/>ACQUIRED      DISPOSED</p> |

Comments: \_\_\_\_\_

**SCHEDULE B**  
**Interests in Real Property**  
(Including Rental Income)

Name

John Robert Ebner

► STREET ADDRESS OR PRECISE LOCATION

235 Railway Street

CITY

San Dimas, CA 91773

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☒ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
ACQUIRED      DISPOSED

NATURE OF INTEREST

- ☒ Ownership/Deed of Trust      ☐ Easement  
  
☐ Leasehold \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☒ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

Nicole Lopez

► STREET ADDRESS OR PRECISE LOCATION

CITY

FAIR MARKET VALUE

- ☐ \$2,000 - \$10,000  
☐ \$10,001 - \$100,000  
☐ \$100,001 - \$1,000,000  
☐ Over \$1,000,000

IF APPLICABLE, LIST DATE:

\_\_\_\_/\_\_\_\_/10      \_\_\_\_/\_\_\_\_/10  
ACQUIRED      DISPOSED

NATURE OF INTEREST

- ☐ Ownership/Deed of Trust      ☐ Easement  
  
☐ Leasehold \_\_\_\_\_  
Yrs. remaining      Other

IF RENTAL PROPERTY, GROSS INCOME RECEIVED

- ☐ \$0 - \$499      ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000

SOURCES OF RENTAL INCOME: If you own a 10% or greater interest, list the name of each tenant that is a single source of income of \$10,000 or more.

\* You are not required to report loans from commercial lending institutions made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
  
☐ Guarantor, if applicable

NAME OF LENDER\*

ADDRESS (Business Address Acceptable)

BUSINESS ACTIVITY, IF ANY, OF LENDER

INTEREST RATE

TERM (Months/Years)

\_\_\_\_\_%      ☐ None

HIGHEST BALANCE DURING REPORTING PERIOD

- ☐ \$500 - \$1,000      ☐ \$1,001 - \$10,000  
☐ \$10,001 - \$100,000      ☐ OVER \$100,000  
  
☐ Guarantor, if applicable

Comments:

**CALIFORNIA FORM 700**  
**FAIR POLITICAL PRACTICES COMMISSION**  
 Name \_\_\_\_\_  
**John Robert Ebner**

| ▶ 1. INCOME RECEIVED   | ▶ 1. INCOME RECEIVED                           |
|--|--|
| NAME OF SOURCE OF INCOME<br><u>Hoag Memorial Hospital Presbyterian</u>   | NAME OF SOURCE OF INCOME<br>_____              |
| ADDRESS (Business Address Acceptable)<br><u>One Hoag Drive, Newport Beach, CA 92663</u>  | ADDRESS (Business Address Acceptable)<br>_____ |
| BUSINESS ACTIVITY, IF ANY, OF SOURCE<br><u>Hospital</u>  | BUSINESS ACTIVITY, IF ANY, OF SOURCE<br>_____  |
| YOUR BUSINESS POSITION<br>_____  | YOUR BUSINESS POSITION<br>_____                |
| GROSS INCOME RECEIVED  |  |
| <input type="checkbox"/> \$500 - \$1,000   | <input type="checkbox"/> \$1,001 - \$10,000    |
| <input checked="" type="checkbox"/> \$10,001 - \$100,000   | <input type="checkbox"/> OVER \$100,000        |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED  |  |
| <input checked="" type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income                             |  |
| <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership   |  |
| <input type="checkbox"/> Sale of _____<br><span style="display: block; text-align: center; font-size: small;">(Property, car, boat, etc.)</span> |  |
| <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more<br>_____                     |  |
| <input type="checkbox"/> Other _____<br><span style="display: block; text-align: center; font-size: small;">(Describe)</span>                    |  |
| GROSS INCOME RECEIVED  |  |
| <input type="checkbox"/> \$500 - \$1,000   | <input type="checkbox"/> \$1,001 - \$10,000    |
| <input type="checkbox"/> \$10,001 - \$100,000  | <input type="checkbox"/> OVER \$100,000        |
| CONSIDERATION FOR WHICH INCOME WAS RECEIVED  |  |
| <input type="checkbox"/> Salary <input type="checkbox"/> Spouse's or registered domestic partner's income  |  |
| <input type="checkbox"/> Loan repayment <input type="checkbox"/> Partnership   |  |
| <input type="checkbox"/> Sale of _____<br><span style="display: block; text-align: center; font-size: small;">(Property, car, boat, etc.)</span> |  |
| <input type="checkbox"/> Commission or <input type="checkbox"/> Rental Income, list each source of \$10,000 or more<br>_____                     |  |
| <input type="checkbox"/> Other _____<br><span style="display: block; text-align: center; font-size: small;">(Describe)</span>                    |  |

\* You are not required to report loans from commercial lending institutions, or any indebtedness created as part of a retail installment or credit card transaction, made in the lender's regular course of business on terms available to members of the public without regard to your official status. Personal loans and loans received not in a lender's regular course of business must be disclosed as follows:

|   |  |
|---|--|
| NAME OF LENDER*<br>_____<br>ADDRESS (Business Address Acceptable)<br>_____<br>BUSINESS ACTIVITY, IF ANY, OF LENDER<br>_____<br>HIGHEST BALANCE DURING REPORTING PERIOD<br><input type="checkbox"/> \$500 - \$1,000<br><input type="checkbox"/> \$1,001 - \$10,000<br><input type="checkbox"/> \$10,001 - \$100,000<br><input type="checkbox"/> OVER \$100,000 | INTEREST RATE<br>_____% <input type="checkbox"/> None<br>SECURITY FOR LOAN<br><input type="checkbox"/> None <input type="checkbox"/> Personal residence<br><input type="checkbox"/> Real Property _____<br><div style="text-align: right;"><i>Street address</i></div> <div style="text-align: right;">_____<br/><i>City</i></div> <input type="checkbox"/> Guarantor _____<br><input type="checkbox"/> Other _____<br><div style="text-align: right;"><i>(Describe)</i></div> |
|---|--|

**Comments:** \_\_\_\_\_